

OFFICE USE ONLY

ISSUED _____

LICENSE NO. _____



Washington State Department of Agriculture
Food Safety, Animal Health & Consumer Services
PO Box 42591
Olympia WA 98504-2591
(360) 902-1876

CASHIER USE ONLY

4104

APPLICATION FOR FOOD PROCESSING PLANT LICENSE

NEW LICENSE*Please type or print clearly*

LICENSE EXPIRATION DATE: JUNE 30

FIRM NAME: _____ APPLICANT NAME: _____ MAILING ADDRESS: _____ _____ _____	PHYSICAL PLANT LOCATION: _____ _____ _____ _____
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NAME OF: <input type="checkbox"/> OWNER <input type="checkbox"/> MANAGER	TELEPHONE NUMBER _____	COUNTY _____
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Firm operates as:

☐ Individual
 ☐ Partnership
 ☐ Cooperative
 ☐ Corporation
 ☐ LLC

List name and address of all partners and/or officers below:

NAME	TITLE	ADDRESS (Include City, State, Zip Code)

If firm is out of state, provide name and address of individual residing in Washington State who is authorized to receive and accept service of summons and legal notice.

Name: _____

Address: _____

Type of food(s) processed: _____ _____ _____	<p style="text-align: center;">APPLICANT STATEMENT</p> <p><i>I certify that the above information is correct and that the fee enclosed corresponds to the estimated gross annual sales for the initial license period.</i></p> <p>Signature of Applicant: _____</p> <p>Title: _____</p> <p>Date: _____</p>
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<p style="text-align: center;">FEE SCHEDULE*</p> <table style="width: 100%;"> <tr> <td style="width: 60%;">If gross annual sales are:</td> <td style="width: 40%;">The license fee is:</td> </tr> <tr> <td>\$0 to \$50,000.....</td> <td>\$ 55.00</td> </tr> <tr> <td>\$50,001 to \$500,000.....</td> <td>\$ 110.00</td> </tr> <tr> <td>\$500,001 to \$1,000,000.....</td> <td>\$ 220.00</td> </tr> <tr> <td>\$1,000,001 to \$5,000,000.....</td> <td>\$ 385.00</td> </tr> <tr> <td>\$5,000,001 to \$10,000,000.....</td> <td>\$ 550.00</td> </tr> <tr> <td>Greater than \$10,000,000.....</td> <td>\$ 825.00</td> </tr> </table> <p><small>*Fees are based in gross sales of types of food that WSDA inspects and for which the license is required and issued.</small></p>	If gross annual sales are:	The license fee is:	\$0 to \$50,000.....	\$ 55.00	\$50,001 to \$500,000.....	\$ 110.00	\$500,001 to \$1,000,000.....	\$ 220.00	\$1,000,001 to \$5,000,000.....	\$ 385.00	\$5,000,001 to \$10,000,000.....	\$ 550.00	Greater than \$10,000,000.....	\$ 825.00	<p style="text-align: center;">REMITTANCE</p> <p>The license fee is determined by estimating the gross annual sales for the initial license period.</p> <p>TOTAL LICENSE FEE REMITTANCE: \$ _____</p>
If gross annual sales are:	The license fee is:														
\$0 to \$50,000.....	\$ 55.00														
\$50,001 to \$500,000.....	\$ 110.00														
\$500,001 to \$1,000,000.....	\$ 220.00														
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\$5,000,001 to \$10,000,000.....	\$ 550.00														
Greater than \$10,000,000.....	\$ 825.00														

ATTACHMENT A

Sanitation Schedule

Please list sanitation schedule and procedures for clean up of facilities and equipment.

- **List** the *equipment and utensils* used for processing of food.
- How the *equipment and utensils* will be cleaned, sanitized and how often.

Briefly describe how:

- Walls, floors, ceilings and like surfaces will be cleaned and maintained.
- Restrooms, hand washing sinks, equipment-washing facilities will be supplied and used.

ATTACHMENT B: Intended Type of Process

Type of product(s) to be processed:

Type of processing (*circle appropriate processes*)

1. **Acidified - Pickling Foods**

- A. Acidifying
(Adding vinegar, citric acid to a low acid food)
- B. Pickling by Natural Fermentation

2. **Acidified - Condiments, Vinegar's**

- A. Vegetables
- B. Vinegar (only if other products added)
- C. Salsa (shelf stable)
- D. Dressings
- E. Sauces (Bar-B-Q, etc.)

3. **Acidified – Low Acid Canned Foods**

- A. Low Acid Food
(vegetables, mushrooms, fish, etc.)
 - 1) Retortable Pouches
 - 2) Rigid Metal Cans
 - 3) Other (describe)
- B. High Acid Food
(Fruit, tomatoes)

4. **Baking**

5. **Blending, Dry Mixing**

6. **Candy Making**

7. **Coffee/Tea Roaster**

8. **Flour Grinding/Milling**

9. **Fruit Processing**

- A. Freezing
- B. Dehydrating, drying
- C. Cider, juice, processing
- D. Jams, jellies, syrups, sauce

NOTE:

Low-Acid and "Low-acid food" means:

Food with a pH greater than 4.6. (canned fish, vegetables) and water activity greater than 0.85.

Acidified Food - means:

A low-acid food to which acid or acid foods are added to attain a finished pH at or below 4.6.(pickles) Unless an analysis shows otherwise, WSDA considers sauce, dressing, and salsa products low-acid or acidified foods. Low-acid and acidified foods present potential serious health hazards and are subject to regulations specified in Title 21 of the Code of Federal Regulations, Parts 113 and 114.

The Federal Drug Administration (FDA) **requires** processors of Low-acid and acidified foods to:

- Register with the FDA; (no later than 10 days after first engaging in the manufacture, processing or packing of Acidified Foods or Low Acid Canned Foods.)
- File scheduled processes for each product and container size;

Receive appropriate training from an FDA approved processing school;

Maintain specific processing records; and

Use equipment that meets certain requirements.

Contacts:

Regional FDA Office
P.O. Box 3012
22201 23rd Drive SE
Bothell, WA 98021-4421
(425) 486-8788

FDA Center for Food Safety
and Applied Nutrition
LACF Registration HFS-618
200 "C" Street SW
Washington, DC 20204
(202) 205-5282

Type of processing (*circle appropriate processes*) *Continued:*

10. Ice Maker

11. Pasta Manufacturing

12. Rabbit / Poultry Butchering

13. Refrigerated Products

- A. Salsa
- B. Salad Dressing
- C. Ready to eat products _____
- D. Other: _____

14. Salad Manufacturer

- A. Cut Green
- B. Coleslaw, Potato, Macaroni,
- C. Seafood

15. Sandwich Making

(If more than 3% raw or 2% cooked meat by volume in finished product contact USDA)

16. Seafood

- A. Butchering
- B. Freezing
- C. Processing

17. Smoking (fish, seafood)

- A. Hot Smoke
- B. Cold Smoke
- C. Vacuum Packaged (Does your label contain a statement "Keep Refrigerated at 38°F or less")

18. Snack Foods

19. Soft Drink Bottler

20. Soup Making

- 21. Dry Mix
- 21. Liquid

21. Tofu Manufacturing

22. Vegetable Processing

- A. Freezing
- B. Dehydrating, drying
- C. Juice processing

23. Water Bottling

23. Other (*explain*)

ATTACHMENT B (continued)

INGREDIENT/PROCESSING INFORMATION

INSTRUCTIONS: (MUST BE TYPED) Attach additional sheets as needed.

Provide the following information for each type of product you intend to process (for example: Cookies, Bread, Jam, Juice, etc.)

- 1) A flow diagram of each step of the process and a complete ingredient list for each product.**
- 2) Include in your flow diagram time and temperatures the product stays at for each step of the process.**

Include process details:

<u>Receiving</u>	List all Ingredients – include the source of supplier. Indicate how they are received such as frozen, refrigerated, or as dry goods.
<u>Storage</u>	Frozen, refrigerated or room temperature.
<u>Processing</u>	Describe basic preparation. Include a general flow chart or diagram.
<u>Packaging</u>	Describe packaging details such as bulk pack or retail size, and type of packaging.
<u>Distribution</u>	Frozen, refrigerated, dry goods or combination and type of transportation.

When processing potentially hazardous food products including Low Acid Canned Food (LACF) or acidified products, you are required to provide written documentation from a “Processing Authority” for each process prior to licensing. For example, pickled vegetables, pickles, barbecue sauce, mustard, condiments, bakery products in a modified atmosphere package (MAP), seafood (canned, glass jars or MAP pouches), jerky products, salsas, sauces, vinegar with added ingredients, oils with added ingredients should all be reviewed for shelf stability. Documentation from a “Processing Authority” is not required if product(s) are “Keep Refrigerated” only products.

ATTACHMENT C: (USE INK)
Floor Plan

Please sketch the floor plan of your operation. Include the location of sinks, floor drains (if needed), placement of equipment, doors, restroom(s). Please indicate approximate dimensions of building and rooms.

ATTACHMENT D PROPOSED LABELING

PROVIDE A TYPED PROPOSED LABEL FOR EACH TYPE OF PRODUCT you intend to process. Place below or attach a copy of the TYPED proposed label to this sheet. Your label must include the following:

1. **Name of Product** – The common or usual name of the product must be prominently displayed such as “Pickled Asparagus”.
2. **Manufacturer and/or Distributor Name & Address** - Full business name and address must appear on the label. Required information must include your business name, address (street or a P. O. Box), City, State and Zip Code. If your business address is listed in the current phone directory then the street or P. O. Box may be omitted from the label. We recommend that you include your phone, fax or web information if desired.
3. **Net weight** - Both English and metric values are required. Example: 12 FL oz (355ml).
4. **Ingredients** – Each ingredient and any sub-component of that ingredient must be listed in descending order of predominance by weight. When a processed food ingredient is fabricated from two or more ingredients then the sub-components must be listed in parenthesis after the ingredient. For example: If butter (which is a multi-component product) is an added ingredient to your product you will list *Butter (cream, salt, annatto)*. If flour or other types of flours such as unbleached flour are listed as an ingredient it should be listed as Wheat flour or unbleached wheat flour on your ingredient statement. Please be advised that due to their serious nature all allergens must be identified, such as: Wheat, peanuts, milk, eggs, tree nuts, soybeans, fish, crustacea (crab, shrimp, lobster), sulfites, yellow dye #5

Attachment E Water Supply Testing Requirements

Type of water system:

City ☐ Municipal ☐ Well ☐ Spring ☐ Other Private Water Supply ☐

Answer the following if you are using Well, Spring or other private water supply
To determine the water supply testing requirements for your facility, please complete this questionnaire and refer to the requirements on the following pages:

Questions

YES

NO

1. Do you process bottled water or ice at your facility?

☐
☐

If YES, your facility must comply with the Group A Water System requirements (See 2A page 9). If you process bottled water, your facility must also meet specifications outlined in Title 21 CFR, Part 129.

If NO, go to question no. 2.

2. Is any of your facility's water supplied from a well, spring, or other private water system?

☐
☐

If YES, go to question no. 3.

If NO, there are no special testing requirements (See 1 page 8).

3. Does your business employ 25 or more people each day for 60 or more days per year?

☐
☐

If YES, your processing facility meets definition for Group A Water System (See Answer 2A- page 9).

If NO, go to question no. 4.

4. Is your processing facility located at your single-family residence, where you employ only immediate family members?

☐
☐

If YES, you must have your water analyzed before a processing license can be issued (See 2C- page 9).

If NO, your processing facility meets the definition for a Group B Water System (See 2B – page 9).

See next page for inorganic chemical and physical characteristic water analysis requirements.

Attachment E cont..

WATER SUPPLY AND TESTING REQUIREMENTS

Your water supply must meet the State Department of Health (DOH) requirements for potable water. If you are on a public water supply (city or municipal water supply or water association), it meets these requirements. If you are using a well or other private water supply you must meet the State Department of Health (DOH) requirements for a Group A or Group B water system, (the A or B type will depend on the number of employees and how many days you operate). A single family food processor using a private water system with no outside employees must meet equivalent water testing requirements required under WSDA. These requirements are further defined below by system type:

1. City, Community, and Other Municipal Water Systems:

Except for bottled water and ice processors, food processors on any of these water supply systems do NOT need to test their water supply. If you process bottled water or ice, see 2A.

2A. Bottled water / ice processors OR food processors with water supplied from a well, spring, or other private water system that employ 25 or more people each day for 60 or more days per year:

These processing facilities must comply with the Washington State Department of Health's **Group A Water System** requirements. Contact the Department of Health Division of Drinking Water for approval of the water system. Written approval from the Department of Health Division of Drinking Water is required before a food processor license can be issued.

Washington State Department of Health Division of Drinking Water Contacts:

Eastern Washington Regional Office
West 1500 Fourth Avenue
Suite 305
Spokane, WA 99204
Phone: (509) 456-2457
Fax: (509) 456-2997

Southwest Washington Regional Office
2411 Pacific Avenue
P.O. Box 47823
Olympia, WA 98504-7823
Phone: (360) 664-2657
Fax: (360) 664-8058

Northwest Washington Regional Office
1511 Third Avenue, Suite 719
Mail Stop K17-12
Seattle, WA 98101
Phone: (206) 464-7670
Fax: (206) 464-7059

Note: Bottled water processors must also meet requirements of the Good Manufacturing Practices for Bottled Water (Title 21 CFR, Part 129).

Attachment E cont..

- 2B. Food processors with water supplied from a well, spring, or other private water system that employs less than 25 people each day (other than immediate family members) AND/OR operate for less than 60 days per year:**

These processing facilities meet the Washington State Department of Health's definition of a **Group B Water System**. Contact the Department of Health Division of Drinking Water or the County Health Department for approval of the water system. Written approval from the Department of Health Division of Drinking Water or the County Health Department is required before a food processor license can be issued.

See "Contacts" listed above or the County Health Department Roster provided in the Application Packet Appendix.

- 2C. Food processors with water supplied from a well, spring, or other private water system that operate in a single-family residence and only employ immediate family members:**

The water systems for these food processing facilities are regulated by the Department of Agriculture and must meet the Department of Health's Group B requirements for a satisfactory bacteriological analysis. These food processors must submit a recent (*within one month*) satisfactory bacterial analysis report for their water supply before a processor license can be issued and every 12 months thereafter. See next page for bacteriological water analysis requirements. If the water is used as an ingredient in the processed product see 2D below.

- 2D. Water from a private water system used as an ingredient in processed food:**

If a food processor uses water as an ingredient in their food processing, the water supply must also meet the Department of Health's Group B inorganic chemical and physical requirements for potable water. This includes water used in brine and glazing solutions or water used to reconstitute concentrates or dehydrated products. These food processors are required to submit a recent (*within one month*) satisfactory inorganic chemical and physical analysis report for their water supply before a food processor's license can be issued. A satisfactory Nitrate analysis is also required every three years thereafter. See page after questionnaire on water supply for inorganic chemical and physical characteristic water analysis requirements.

Attachment E cont..

Bacteriological

Water samples taken for bacteriological analysis must be sampled from the furthest end of the water distribution system. The Maximum Contaminant Level (MCL) for coliform is the presence of coliform in the water sample (WAC 246-291-320). A satisfactory bacteriological water analysis is required prior to licensing and every 12 months thereafter.

Inorganic Chemical

Water samples taken for inorganic chemical analysis (primary and secondary chemicals) must be collected at the water source or well field before treatment. Review tables below for the Maximum Contaminant Levels (MCLs) allowed for each primary and secondary chemical (WAC 246-291-330). If the water is used as an ingredient in the processed food, a satisfactory inorganic chemical water analysis is required prior to licensing.

Primary Chemicals

Substance	Primary chemical MCLs (mg/L)
Antimony	0.006
Arsenic	0.05
Barium	2.0
Beryllium	0.004
Cadmium	0.005
Chromium	0.1
Cyanide	0.2
Fluoride	4.0
Mercury	0.002
Nickel	0.1
Nitrite	1.0
Selenium	0.05
Sodium	no MCL established
Thallium	0.002

Secondary Chemicals

Substance	Secondary chemical MCLs (mg/L)
Chloride	250.0
Fluoride	2.0
Iron	0.3
Manganese	0.05
Silver	0.1
Sulfate	250.0
Zinc	5.0

Nitrate

The Maximum Contaminant Level for Nitrate is 10.0 mg/L. A satisfactory nitrate water analysis is required prior to licensing and every three years thereafter.

Physical Characteristics

If the water is used as an ingredient in the processed food, a satisfactory physical characteristic analysis is required prior to licensing. After initial satisfactory analysis, the Department of Health determines the monitoring frequency on a case-by-case basis.

Substance	MCL
Turbidity	1-0 NTU
Color	15 color units
Hardness	No MCL established
Specific Conductivity	700 umhos/cm
Total Dissolved Solids	500 mg/L

A satisfactory water analysis is required before licensing and according to the monitoring frequency thereafter, as noted above.

Food Processor License Application Final Check List

- _____ 1. Reviewed Enclosed rules and regulations:
- _____ 2. Completed **application form**.
- _____ 3. Completed Attachment A -- **SANITATION SCHEDULE**.
- _____ 4. Completed Attachments B -- **INGREDIENT/PROCESSING INFORMATION**
- _____ 5. Completed Attachment C -- **FLOOR PLAN**
- _____ 6. Completed Attachment D -- **LABEL INFORMATION**
- _____ 7. Completed Attachment E -- **WATER SUPPLY TYPE & TESTING REQUIREMENTS**.
- _____ 8. Enclosed documentation verifying a potable (drinkable) water supply system (if required under Attachment E for your type of food processing operation).
- _____ 9. Documentation attached from a Process Authority if "product testing" is required.
- _____ 10. Proof of registration/certification with the Food & Drug Administration for low-acid and acidified foods. **Low-acid and acidified foods present potential serious health hazards and are subject to regulations specified in Title 21 of the Code of Federal Regulations, Parts 113 & 114.**
- _____ 11. If you checked Low Acid Canning, do you have a person certified to supervise the operation of the retort?
- _____ 12. If you checked Acidified Foods, do you have a person certified in acidified foods to supervise the processing?
- _____ 13. If handling or processing a seafood product have you reviewed or do you fall under the seafood HACCP requirements as outlined in Title 21 Part 123 – Fish & Fishery Products? ☐ Yes ☐ No. If yes, do you have a Seafood HACCP (Hazard Analysis & Critical Control Point) Plan completed? ☐ Yes ☐ No

**Forward application and attachments
with a check or money order to:**

**Department of Agriculture
Food Safety Program
P.O. Box 42591
Olympia, WA 98504-2591**

Please note that the processing time from the receipt of your application to the time of an inspection can take 4 – 6 weeks. It will take longer if you do not complete and attach all the documentation required for licensing. Include additional sheets as necessary.

Upon receipt of the application and review by the Olympia office, a local Food Safety Officer will contact you at the phone number provided on your application.

If you have any questions that cannot be answered by the information provided in this packet, please call the Olympia Food Safety Office at **360-902-1876**.